GOVERNMENT OF INDIA
PLANNING
LOK SABHA

UNSTARRED QUESTION NO:458
ANSWERED ON:27.07.2005
SETTING UP OF SPECIAL EDUCATION ZONES
Owaisi Shri Asaduddin

Will the Minister of PLANNING be pleased to state:

(a) whether in India doctor-patient ratio is 1:1800;

(b) if so, whether in its mid-term appraisal of the Tenth Plan, the Planning Commission has recommended setting up of special education zones to meet the growing demand of doctors-engineers as reported in the Times of India dated May 19, 2005:

(c) if so, whether the Government has approved the proposal of Planning Commission;

(d) if so, the details thereof; and

(e) the detailed strategy chalked out by the Government to solve the problem of shortage of doctors, engineers and other professionals?

Answer

MINISTER OF STATE IN THE MINISTRY OF PLANNING (SHRI M.V. RAJASEKHARAN)

(a): The doctor population ratio in India is 1:1722 if only allopathic doctors are taken into account.

(b): No, Sir.
(c) & (d): Do not arise.

(e): The Mid-Term Appraisal (MTA) of Tenth Five Year Plan on the health sector recognizes that distribution of medical colleges in the country is skewed and has recommended that the shortage of trained manpower in under served states can be fully addressed only through setting up of medical colleges in these states. The MTA also points out that some medical colleges have poor utilization of services, on account of sub-optimal location vis-Ã -vis demand for services and recommends that the requirement of an essentiality certificate from a joint representative committee comprising of the professional medical association, and government be made mandatory, prior to setting up new medical colleges, so as to plan for appropriate and optimal outreach. The Mid-Term Appraisal emphasises the need for better dispersion of medical colleges across needy states and more rigorous regulation of standards in medical education. Further, the public and the private sectors need to jointly set up stringent entry norms for registration of medical practitioners every five years, with renewal being contingent upon attendance and completion of the requisite courses in Continuing Medical Education Programmes.

The MTA recognizes that given the competing claims for inadequate financial resources at both central and state levels, it is unlikely that the Government alone can take care of the needs of medical education to serve a population of 1.6 billion in 2050. There would be a need to leverage significant private investment in medical education to create high capacity across the medical, nursing and para-medical professions. India is rapidly becoming a destination for students from across the world, seeking low cost medical education. The MTA recommends that the Knowledge Commission should examine some methods of enabling non-resident and foreign students to compete for seats in government and private medical colleges through competitive examinations. The incoming revenues from these students should be deployed towards a cross- subsidy for Indian students from economically weaker sections (EWS) to pursue medical education, and towards providing additional beds in teaching hospitals to support the minimal requirements for teaching. This will also enhance capacities for in patient hospital care to keep pace with increasing demand.

The Mid-Term Appraisal of Tenth Plan, notes the significant increase in the number of technical educational institutions and total intake of students, and urges a continued focus on increased intake capacity; improving quality and faculty development which are some of the key issues relating to technical and management education during the Tenth Plan. The MTA recommends expansion of institutions like IITs and IIMs in order that these set standards for technical and management institutions. It also suggests that the accreditation process for higher and technical institutions be made transparent and effective.